

IFW

2654

FERENCE & ASSOCIATES LLC
Amendment Transmittal

Atty. Docket No. YOR920000737US1
(590.033)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No. : Luo et al.
Filed : 09/737,259 Examiner : T. Shortledge
For : December 14, 2000 Group Art Unit : 2654
ADAPTATION OF STATISTICAL PARSERS BASED ON
MATHEMATICAL TRANSFORM

COMMISSIONER OF PATENTS
P.O. Box 1450
Alexandria VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

1. Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.

OR

2. In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. Small Entity status of this application has been established by a verified statement previously submitted.
4. A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF MAILING UNDER 37 CFR § 1.8(a)

I hereby certify that this correspondence and any documents referred to as enclosed therewith are being deposited with the United States Postal Service as first class mail addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria Virginia 22313-1450 on April 30, 2007.

Stanley D. Ference III

(Type or print name of person mailing paper or fee)

(Signature of person mailing paper or fee)

A handwritten signature in black ink that reads "Stanley D. Ference".

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5. Also enclosed: _____
6. No additional filing fee is required.
7. The filing fee has been calculated as shown below:

	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)	x	RATE	FEE	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
Total Claims	25	-	** 25	= * 0	x \$25	=	O	x	\$50	= 0
Ind. Claims	3	-	*** 3	= * 0	x \$100	=	O	x	\$200	= 0
<input type="checkbox"/> Multiple Dependent Claim Presented					+ \$180	=	O	+ R	\$360	=
					<u>TOTAL</u>	= \$	O	<u>TOTAL</u>	\$0	

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space

*** If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. Applicant encloses herewith a check for \$____ to cover the filing fee.
9. The Commissioner is hereby authorized to charge the \$____ filing fee to Deposit Account No. 50-0510.
10. The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

FERENCE & ASSOCIATES LLC

By

Stanley D. Ference III
Reg. No. 33,879

Dated: April 30, 2007

Mailing Address:

Customer No. 35195
FERENCE & ASSOCIATES LLC
409 Broad Street
Pittsburgh, Pennsylvania 15143
(412) 741-8400
(412) 741-9292 - Facsimile